

## Louisiana SPF Prevention Resource Assessment Survey

**Copy and complete the following table for each prevention program, policy, and/or practice funded by your agency!**

**Date:**

**Agency Name/Address:**

**Phone Number/Email:**

1) What is the name of the program, policy, and/or practice and brief description?				
2) What is the target population of the program, policy, and/or practice?				
3) What problem behavior is targeted?	Substance Abuse	Violence	Teen Pregnancy	Delinquency
For Substance Abuse, please list specific drug targeted.	School Dropout	Suicide/Depression	Other mental illnesses	Other (specify)
4) What are the causal factor(s) as well as the risk and/or protective factors targeted by the program, policy, and/or practice? Please list out each risk and/or protective factor and causal factor within the appropriate domain.	<i>Causal Factors</i>		<i>Risk and Protective Factors</i>	
	<input type="checkbox"/> Social Availability <input type="checkbox"/> Retail Availability <input type="checkbox"/> Promotion <input type="checkbox"/> Crim Justice/Enforcemt <input type="checkbox"/> Community Norms <input type="checkbox"/> Individual Factors		Family	
			Community	
			School	
			Individual/ Peer	
5) What agency or group delivers the program, policy, and/or practice?				
6) How many people (those targeted for change) will the program, policy, and/or practice reach during the current calendar year?				
7) a) What is the duration of the program, policy, and/or practice? b) How often is the program, policy, and/or practice offered to the target population?	a)  b)			
8) What prevention strategy does the program, policy, and/or practice use?  Please select one strategy per form.	<input type="checkbox"/> Education <input type="checkbox"/> Environmental strategies <input type="checkbox"/> Alternative activities (for high risk youth) <input type="checkbox"/> Community-based process <input type="checkbox"/> Problem Identification and referral <input type="checkbox"/> Information dissemination			
9) What type of implementation data is collected?	<input type="checkbox"/> Attendance <input type="checkbox"/> Satisfaction <input type="checkbox"/> Other			
10) Is the program, policy, and/or practice evidence based?	<input type="checkbox"/> YES <input type="checkbox"/> NO <i>If yes, which agency(s) list contains the program, policy, and/or practice?</i> <input type="checkbox"/> NIDA <input type="checkbox"/> CDC <input type="checkbox"/> CSAP <input type="checkbox"/> DOE <input type="checkbox"/> Drug Strategies <input type="checkbox"/> OJJDP <input type="checkbox"/> None of the above			
11) Has the implementing agency (as listed in Question 5) evaluated the outcomes of the program, policy, and/or practice?			<input type="checkbox"/> YES <input type="checkbox"/> NO    If yes, explain.	
12) What are the current funding amounts and sources?	Amount:\$		Source:	
	Amount:\$		Source:	
	Amount:\$		Source:	
13) In which parish(es) is the program, policy, and/or practice delivered?				
14) What are the skills and expertise needed to deliver the program, policy, and/or practice?				
15) When was this program, policy and/or practice first offered in the parish(es) and when was the last time it was offered in the parish(es)?				

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## Definitions and Examples

Note: These terms are in the order used on the Prevention Resource Assessment Survey form.

1. *Program, Policy, and/or Practice Name and Description*– Common name of the program, policy, and/or practice and a one to two sentence description of strategies and goals.
2. *Target Population* – The target population is the group of people that the program, policy, or practice is intended to influence, e.g., youth, adults, parents, community at large, etc. If the program you're describing has criteria that people must meet before they are allowed to participate in the program, such as age group, membership in an ethnic group, gender, or other criteria, for example, lacking health insurance, then please list those requirements also.
3. *Problem behavior focus* – The behaviors listed are those commonly addressed by prevention programs. Please add others as needed. Please specify the drug targeted if substance abuse is chosen.
4. *Targeted risk and/or protective factor and/or causal factors by domains* – Please indicate the causal factor(s) as well as any risk and/or protective factors that the program is intended to affect. If the intervention addresses one of the causal factors listed, please check the appropriate box(es). Next, consult the attached list of risk and protective factors and list the corresponding number for each risk or protective factor that the program addresses within the appropriate domain box. For example, if the intervention is a parenting program that addresses family management issues, family conflict and parent-child bonding, you would indicate FR1 (poor family management risk factor), FR2 (family conflict risk factor) and FP1 (bonding) in the family domain box because all of the risk and protective factors addressed by this program fall within the family domain. While many interventions do target multiple causal factors and/or risk and protective factors, please think carefully about which factors are directly targeted by the activities of the intervention. If there is not a direct connection between the activities of the intervention and a causal/risk/protective factor, do not list that factor as a targeted factor.
5. *Agency or group delivering* – List the name and address of the agency or group that actually delivers the program, policy, and/or practice.
6. *Reach* – List the number of targeted individuals that will receive the program, policy, and/or practice during the current calendar year.
7. *Duration* – How often is the program, policy, and/or practice offered to the targeted population, e.g., 2 hours a day, once a week for 12 weeks, or 8 hours a day for three consecutive days.
8. *Prevention Strategies* – The program, policy, and/or practice being implemented may employ more than one of the strategies to reach the targeted population. **Please report only one strategy per form.** For example, if your intervention employs the following strategies Education, Environmental Strategies, and Information Dissemination, then, three separate forms (one for each of the strategies) would need to be completed. Please see the attached Prevention Strategies List for additional information. Education involves two-way communication and is distinguished from the information dissemination strategy by the fact that interaction between the educator/ facilitator and the participants is the basis of its activities. Activities under this strategy aim to affect critical life and social skills, including decision-making, refusal skills, critical analysis (e.g., of media messages), and systematic judgment abilities. Environmental establishes or changes written and unwritten community standards, codes, and attitudes, thereby

influencing incidence and prevalence of substance abuse in the general population. This strategy is divided into two subcategories to permit distinction between activities that center on legal and regulatory initiatives and those that relate to the service and action-oriented initiatives. Alternatives provides for the participation of target populations in activities that exclude substance use. The assumption is that constructive and healthy activities offset the attraction to--or otherwise meet the needs usually filled by--alcohol and drugs and would, therefore, minimize or obviate resort to the latter. Community-based process aims to enhance the ability of the community to more effectively provide prevention and treatment services for substance abuse disorders. Activities in this strategy include organizing, planning, enhancing efficiency and effectiveness of services implementation, interagency collaboration, coalition building, and networking. Problem identification and referral aims at identification of those who have indulged in illegal/age-inappropriate use of tobacco or alcohol and those individuals who have indulged in the first use of illicit drugs in order to assess if their behavior can be reversed through education. It should be noted, however, that this strategy does not include any activity designed to determine if a person is in need of treatment. Information dissemination provides awareness and knowledge of the nature and extent of substance use, abuse, and addiction and their effects on individuals, families, and communities. It also provides knowledge and awareness of available prevention programs and services. Information dissemination is characterized by one-way communication from the source to the audience, with limited contact between the two.

*9. Implementation Data* – Which types of implementation data are collected by the implementing agency? **Attendance/Reach** - Are there data to show the number of attendees enrolled and completing the program? Or, for broader policy or practice, are there data to show the number of people the policy or practice affects? For example, if the policy or practice applies to all residents of the city/parish/state and what's that population, the number for a school policy would be the number of students enrolled in the school. Alternatively, for a practice such as checking ID's at a fair/festival, then the number needed is the estimated number of attendees to that fair/festival. **Satisfaction** - Are there data to show attendee satisfaction with the program, policy, and/or practice? **Other** - Are there other types of data collected about the implementation of this program, policy and/or practice, such as intervention fidelity data? Please check all that apply.

*10. Evidence-Based Program, Policy, and/or Practice* – These are terms used by federal agencies to categorize prevention programs. Similar terms include “model programs” or “science based programs.” A program must show positive results and meet scientific research criteria in order to be categorized as evidence-based. If the program is endorsed by one of the federal agencies listed as an evidence-based intervention please check the agency that endorses it. If the intervention is evidence-based but has not been endorsed by any of the listed agencies, please check “none of the above.”

*11. Program evaluation* – Please indicate whether the implementing agency has evaluated the outcomes of the program. Outcome evaluations focus on measuring program effectiveness, e.g., change in knowledge, attitudes, behavior, or skills, whether randomized control trials or pre-test/post-test that the implementing agency conducts. If yes, please list/explain the types of outcome data collected, e.g., substance use, antisocial behavior, risk, protective or causal factor data, knowledge, skills, attitudes, etc.

*12. Funding amount by source* – List the amount of funding per source on each line.

*13. Parish(es) of delivery*– List exactly which parish(es) the program, policy, and/or practice is delivered within.

*14. Skills and expertise needed to implement* – State whether the facilitator should be a certified trainer, have experience with the target population, have substance abuse prevention education/training, have a

college degree, etc. This information assists other agencies that may want to implement this program, policy, and/or practice to understand the human/technical resources required for implementation.

*15. First offered and last offered* - Indicates if the program, policy, and/or practice is currently active or if it is dormant. Gives specific information about the current status of implementation of the program, policy, and/or practice. Also, if the program, policy, and/or practice is available upon request this should be notated in this box. If program, policy, and/or practice is offered in multiple parishes, please list the parishes and specify what is offered in each parish.

## Risk and Protective Factors

<b>Domains</b>	<b>Risk Factors</b>	<b>Protective Factors</b>
<b>Family</b>	Family history of substance abuse (FR1)	Bonding to family with healthy beliefs and clear standards (FP1)
	Family management problems (FR2)	Attachment to family with healthy beliefs and clear standards (FP2)
	Family conflict (FR3)	Opportunities for prosocial involvement (FP3)
	Parental attitudes and involvement in drug use (FR4)	Recognition for prosocial involvement (FP4)
<b>Community</b>	Availability of alcohol/other drugs (CR1)	Opportunities for prosocial involvement in community (CP1)
	Community laws and norms favorable toward drug use (CR2)	Recognition for prosocial involvement (CP2)
	Transitions and mobility (CR3)	
	Low neighborhood attachment and community disorganization (CR4)	
	Extreme economic deprivation (CR5)	
<b>School</b>	Academic failure beginning in elementary school (SR1)	Bonding and attachment to school (SP1)
		Opportunities for prosocial involvement in school (SP2)
	Lack of commitment to school (SR2)	Recognition for prosocial involvement (SP3)
<b>Individual/Peer</b>	Early and persistent antisocial behavior (IR1)	Bonding to peers with healthy beliefs and clear standards (IP1)
	Favorable attitudes toward drugs (IR2)	Attachment to peers with healthy beliefs and clear standards (IP2)
	Rebelliousness (IR3)	Opportunities for prosocial involvement (IP3)
	Friends who use drugs (IR4)	Increase in social skill (IP4)
	Gang involvement (IR5)	
	Early initiation of drug use (IR6)	
	Constitutional factors (IR7)	

# **Prevention Strategies List**

## **Education**

- Parenting and Family Management
- Small Group Sessions
- Ongoing Classroom Sessions
- Peer Leader/Helper Programs
- Education Programs for Youth Groups
- Mentoring
- Preschool ATOD Prevention Programs

## **Environmental Strategies**

### **Social Access/Availability**

- Curfews
- Strengthen laws against provision of alcohol
- Enforce laws against provision of alcohol
- Teen party ordinances
- Social host liability
- Controls on alcohol service at private parties
- Alcohol restrictions at community events

### **Retail Access/Availability**

- Strengthen minimum age of purchase laws for alcohol
- Limit and restrict the location and density of retail alcohol outlets
- Conditional use permits/land use ordinances for alcohol outlets
- Regulations or bans on home delivery of alcohol
- Checking age identification for alcohol
- Increase beverage servers' legal liability
- Minimum age of seller requirements
- Prohibiting anyone under age 21 from bars

- Increase price or taxes on alcohol

### **Promotion**

- Alcohol advertising restrictions in public places
- Prohibition of alcohol sponsorship of events and other promotions
- Countermarketing/counteradvertising campaigns
- Media advocacy
- Media literacy

### **Criminal Justice/Enforcement**

- Compliance checks of alcohol retailers
- Administrative penalties for businesses that violate law
- Party Patrols (specific law enforcement units to address parties)
- “Shoulder-tap” enforcement programs
- Enforce impaired driving laws
- Sanctions and monitoring for convicted drunk drivers
- Sobriety checkpoints
- Enforce open container laws
- Apply appropriate penalties to those in possession of alcohol
- “Cops in shops”

### **Community/Social Norms**

- Alcohol use restrictions in public places
- Social norms campaigns
- Social marketing
- Media campaigns
- College campus policies (offer/require substance-free housing)

### **Individual Factors/Perceived Risk**

- Revoke license for impaired drivers
- Media campaigns to education on current laws and penalties
- ATOD warning posters

- College campus policies (parental notification of campus alcohol infractions)

### **Alternative Activities (for high-risk youth)**

- Alcohol/Tobacco/Other Drug Free Events
- Youth/Adult Leadership Activities
- Community Drop-in Centers
- Communities Service Activities
- Outward Bound (Wilderness)

### **Community Mobilization**

- Community and Volunteer Training
- Systematic Planning
- Multi-Agency Coordination and Collaboration/Coalition
- Community Team Building
- Assessing Services and Funding

### **Problem ID and Referral**

- Employee Assistance Programs
- Student Assistance Programs
- DUI/DWI Education Programs

### **Information Dissemination**

- Clearinghouse/Information Resource Centers
- Resource Directories
- Media Campaigns
- Brochures
- Radio and TV Public Service Announcements
- Speaking Engagements
- Health Fairs or Other Health Promotion
- Information Lines/Hot Lines